

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s):

Shaw-Fen Sylvia Hu

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Group Art Unit No.:

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For:

Truncated Glial Cell Line-Derived Neurotrophic Factor

Docket No.:

A-357C

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Under the guidelines of 37 C.F.R. 1.97, applicant(s) submit(s) a copy of (each of) the reference(s) listed on the attached supplemental PTO-1449 (Modified) form for consideration by the Examiner.

Applicant(s) request(s) consideration of this information and passage of the application to issue.

The Commissioner is hereby authorized to charge any additional fees which may be required or credit any overpayment to Deposit Account No. 01-0519 in the name of Amgen Inc. An original and one copy of this paper are enclosed.

Please send all future correspondence to:

U.S. Patent Operations/RLS Dept. 4300, M/S 27-4-A

AMGEN INC.

One Amgen Center Drive

Thousand Oaks, California 91320-1799

Respectfully submitted

Robert L. Sharp

Attorney/Agent for Applicant(s)

Registration No.:

Phone: (805) 447-5992

Date: July 29, 2003

EXPRESS MAIL CERTIFICATE

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I hereby certify that this paper or fee is being deposited with the United States Postal Service "Ex Patents, P.O. Box 1450, Alexandria